



Wear It Indiana

I hereby give permission to the Indiana Department of Natural Resources to contact me in the future about wearing a life jacket. I hereby give permission for my name to be used in connection with the Wear It Indiana! campaign. I understand that the information below will not be given to any third party nor used for any purpose other than the Wear It Indiana! campaign.

Name *(please print)* _____

Address _____

City _____ State _____ Zip _____

Signature _____

Phone _____ Email _____

www.WearItIndiana.in.gov

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- ★ "Wear it!" while boating and fishing
- ★ Know how it works and keep it in good condition
- ★ Encourage others to wear a life jacket while boating and fishing
- ★ Tell other boaters about new life jacket styles
- ★ Boat safely and responsibly at all times

I, _____, believe that life jackets save lives, and that drowning fatalities related to boating accidents would be dramatically reduced if more boaters wore life jackets. By accepting this life jacket I pledge to:

Pledge Card

